

Commonwealth of Virginia

Application for: ☐ Sewage System ☐ Water Supply

VDH Use Only

Health Department ID# _____

Due Date _____

Owner _____

Mailing Address _____

Agent _____

Mailing Address _____

Site Address _____

Directions to Property: _____

Subdivision _____ Section _____ Block _____ Lot _____

Tax Map _____ Other Property Identification _____ Dimension/Acreage of Property _____

Phone _____

Phone _____

Fax _____

Phone _____

Phone _____

Fax _____

Email _____

Sewage System

Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) **only when ready to build.**

For New Construction: ☐ Certification Letter ☐ Construction Permit

For Existing Construction: ☐ Repair ☐ Modification ☐ Expansion ☐ Replacement

Proposed Use:

☐ Single Family Home (Number of Bedrooms ____) ☐ Multi-Family Dwelling (Total Number of Bedrooms ____)

☐ Other (describe) _____

Will there be a basement: Yes/No (circle one). If yes, will there be fixtures in Basement? Yes/No (circle one).

Are any conditions proposed on this construction permit? Yes/No (circle one). If yes, please check or describe all proposed conditions that apply: ☐ Reduced water flow ☐ Limited occupancy ☐ Intermittent of seasonal use

☐ Temporary use not to exceed 1 year ☐ Other (describe _____)

Water Supply

Will the water supply be Public or Private (circle one). Is the water supply Existing or Proposed (circle one).

If proposed, is this a replacement well? Yes/No (circle one). Will the old well be abandoned? Yes/No (circle one).

Have any buildings within 100' of the proposed well been termite treated? Yes /No (circle one).

All Applicants

Is this an AOSE/PE application? Yes/No (circle one) If yes, is the AOSE package attached? Yes/No (circle one).

In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted the property lines, building location and the proposed well and sewage system sites must be clearly marked and the property sufficiently visible to see the topography, otherwise this application will be denied.

I give permission to the Virginia Department of Health (VDH) to enter onto the property described during normal business hours for the purpose of processing this application and to perform quality assurance checks of evaluations and designs certified by an Authorized Onsite Soil Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.

Signature of Owner/Agent

Date